Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

UNTYPORY

		-		CALC	'	1001						
		CLAIMS A	S FILED - (Column			(Column 2)		SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS			43		-	 -		RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	43 mir	nus 20=	* 23			X\$ 9=	207	OR	X\$18=	
INDEPENDENT CLAIMS				nus 3 =	* Ø			X43=		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				İ	+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	column 2	Ţ	TOTAL	592	OR	TOTAL	
	C	LAIMS AS A	MENDED	ENDED - PART II						• 	OTHER	
		(Column 1)	_	 (Colun 	าก 2)	(Column 3) SMALL			ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAINA	=		X43=		OR	X86=	
<u></u>	FIRST PRESENTATION OF MU		DETIFLE DEFENDENT		CLAIM			+145=		OR	+290=	
1,	38, 41						L	TOTAL		1	TOTAL	
	•					r	.Α	DDIT. FEE		OR,	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus .	**		=	ı	X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CI AINA	= '		X43=		OR	X86=	
	FIRST PRESE		CIIPLE DEFENDENT		CLAIM			+145=		OR	+290=	٠
	·					. L.	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)	73	DD11.1 CC -		,		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	•
	Independent	*	Minus			=		X43=		OR	X86=	•
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									~'' '		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
** [***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR' A	TOTAL DDIT. FEE	
		ber Previously Paid					foun	d in the appi	ropriate box	in colu	ımn 1.	